



Substitute for form 1449/PTO			
<b>SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>			
(Use as many sheets as necessary)			
		<i>Complete if Known</i>	
Application Number		09/845,051	
Filing Date		April 27, 2001	
First Named Inventor		Keil, Sev	
Art Unit		3622	
Examiner Name		Lastra, Daniel	
Sheet	1	of	1
Attorney Docket No: J140U002US00 (B01.002)			

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Examiner Initials*	Cite No	Foreign Document No	Publication Date	Name of Patentee or Applicant of cited Document	T <sup>2</sup>
DL		WO-9726612A1	07/24/1997	Peckover, D. L.	

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Examiner Initials*	Cite No <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.			T <sup>2</sup>
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EXAMINER

DATE CONSIDERED

4/19/07